

DEC. 17. 2004 5:05PM

513 241 6234

DEC 17 2004

NO. 0156 P. 1

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PATENT, TRADEMARK, COPYRIGHT
AND UNFAIR COMPETITION LAW
AND RELATED LITIGATION

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December 17, 2004

FACSIMILE COVER SHEET

To: Technology Center
Examiner Cristina O. Sherr

From: Douglas A. Scholer

Fax: (703) 872-9306
Central Fax Number

Re: Our File: HILB-719C1
Serial No. 09/909,921

Pages:

MESSAGE/COMMENTS

Attached herewith is the formal Response to Office Action/ Amendment
submitted for the above-identified application.

**PLEASE DELIVER IMMEDIATELY TO
EXAMINER CRISTINA O. SHERR**

Enclosures: Facsimile Cover Sheet (1 pg.)
Amendment Transmittal (2 pgs.)
Response to Office Action (7 pgs.)
End Page (1 pg.)

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NO. 0156 P. 2

DEC 17 2004

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Bradley J. Dickey et al
 Serial No.: 09/909,921
 Filed: July 20, 2001
 For: PET DEATH CARE PRODUCTS AND METHOD OF PROVIDING PET
 DEATH CARE PRODUCTS, SERVICES AND INFORMATION
 Examiner: Cristina O. Sherr
 Group No.: 3621
 Attorney Docket: HILB-719C1
 Confirmation No.: 2798

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL

- Transmitted herewith is an amendment for this application.
- ☐ Small Entity status is claimed.
☒ Other Than a Small Entity.
- The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		LARGE ENTITY	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Additional Fee	Rate	Additional Fee
TOTAL *		MINUS **		0	x 25	\$ 0.00	x 50	\$ 0.00
INDEP. *		MINUS ***		0	x100	\$ 0.00	x200	\$ 0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+180		+360	
					TOTAL FEE	\$ 0.00	TOTAL FEE	\$ 0.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest No. Previously Paid for" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

☒ No additional fee for claims is required.

4. ☐ Attached is a check in the sum of \$_____.

☐ Please charge Deposit Account No. 23-3000 in the amount of \$_____.

5. The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136 apply.

Complete (a) or (b) as applicable.

- (a) _____ Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

Extension (months)	Fee for other than small entity	Fee for small entity
_____ one month	\$ 120.00	\$ 60.00
_____ two months	\$ 450.00	\$ 225.00
_____ three months	\$ 1,020.00	\$ 510.00
_____ four months	\$ 1,590.00	\$ 795.00
_____ five months	\$ 2,160.00	\$ 1,080.00

_____ Attached is a check in the amount of \$ _____ for the _____ month extension fee as required by 37 C.F.R. § 1.17(c).

_____ Please charge Deposit Account No. 23-3000 in the amount of \$ _____.

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)


_____ An extension for _____ months has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested. Extension fee due with this request \$ _____.

OR

(b) X Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition for extension of time.

 X If any additional fee for claims or extension of time is required, charge Acct. No. 23-3000.

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CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence for Application No. 09/909,921 is being facsimile transmitted to Technology Center, via Central Fax Number (703) 872-9306, on December 17, 2004.



Douglas A. Scholer, Reg. No. 52,197

12/17/04

Date